

## Product Information

### Anti-Inositol 1,4,5-Triphosphate Receptor (Type I)

produced in rabbit, whole antiserum

Catalog Number **I157**

#### Product Description

Anti-Inositol 1,4,5-Trisphosphate Receptor (Type I) (IP3R-I) is produced in rabbit using as immunogen a synthetic peptide derived from amino acids 1829-1848 of the human IP3 Receptor type I. This sequence is 100% conserved in human, mouse, and rat IP<sub>3</sub>R Type I. The immunizing peptide corresponds to the following amino acid residues: 1884-1903 in rat (SwissProt# P29994); 1893-1902 in mouse (P11881); 1892-1911 in human isoform 1 (Q14643); 1877-1896 in human isoform 2 (Q14643-2); 1844-1863 in human isoform 3 (Q14643-3); 1829-1848 in human isoform 4 (Q14643-4).

Anti-Inositol 1,4,5-Trisphosphate Receptor (Type I) reacts specifically with human, mouse, and rat IP3R-I using microsomes prepared from liver epithelial cells, cerebellum, and vascular smooth muscle cells. The antibody may be used for the localization and detection of the inositol 1,4,5-trisphosphate receptor by immunoblotting (~240 kDa). The antibody is also suitable for immunohistochemistry and immunoprecipitation.

#### Reagent

Supplied as antiserum diluted in phosphate buffered saline with 0.05% sodium azide as a preservative.

#### Precautions and Disclaimer

This product is for R&D use only, not for drug, household, or other uses. Please consult the Material Safety Data Sheet for information regarding hazards and safe handling practices.

#### Storage/Stability

For continuous use, store at -20 °C for up to one month. For extended storage, solution may be frozen in working aliquots. Repeated freezing and thawing, or storage in "frost-free" freezers, is not recommended. If slight turbidity occurs upon prolonged storage, clarify by centrifugation before use.

#### Product Profile

**Immunoblotting:** a working dilution of ~1:1,000 is recommended using liver epithelial cells, cerebellum, and vascular smooth muscle cells.

**Immunohistochemistry:** a working dilution of ~1:100 is recommended using frozen sections

**Note:** In order to obtain the best results using various techniques and preparations, we recommend determining optimal working dilutions by titration.

#### References

1. Kaznacheyeva, E., et al., *J. Gen. Physiol.*, **111**, 847-856 (1998).
2. Haug, L.S., et al., *Neurodegeneration*, **5**, 169-176 (1996).
3. Solon, E., et al., *Dev. Comp. Immunol.*, **21**, 277-285 (1997).
4. Taylor, C.W., et al., *J. Membr. Biol.*, **145**, 109-118 (1995).

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